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March 23, 2010

TO: Each Supervisor

FROM: Marvin J. Southard, D.S.W.
Director of Mental Health

SUBJECT: **MARCH 2010 QUARTERLY REPORT
MENTAL HEALTH SERVICES ACT IMPLEMENTATION**

This report is the third quarterly Mental Health Services Act (MHSA) Implementation Status Report for Fiscal Year (FY) 2009-10. The information included in this report provides an update on the Department of Mental Health's (DMH) implementation of MHSA programs and services for the months of December 2009 through February 2010.

Since the last report on December 22, 2009, the following additional MHSA activities have been or are being accomplished:

MHSA Plan/Activity	Status/Accomplishments/Future Milestones
MHSA Implementation	<p>DMH recently issued its first complete Full Service Partnership (FSP) outcomes report by age group and by provider, comparing the living arrangements of clients the year prior to their entry into an FSP with all subsequent living arrangements. Results from all adult FSP programs indicates that FSP services have resulted in:</p> <ul style="list-style-type: none">• 63% reduction in homelessness.• 90% reduction in use of institutional settings such as IMDs and State Hospitals.• 37% reduction in incarcerations.• 41% increase in independent living.• 105% in congregate living (living with other people by either sharing a house or living in sober living programs). <p>DMH, in conjunction with the California Institute for Mental Health, has developed a learning collaborative to develop strategies to increase system capacity to serve clients and to increase the flow of clients through the public mental health system. Four contract providers will utilize process improvement techniques to test out system capacity and client flow strategies over the next 18 months. The results of the learning will be communicated to the provider network for use in enhancing system capacity.</p>

"To Enrich Lives Through Effective And Caring Service"

MHSa Plan/Activity	Status/Accomplishments/Future Milestones
Information and Technology (IT) Plan	<p>DMH Chief Information Office Bureau (CIOB) is continuing efforts on the Integrated Behavioral Health Information System (IBHIS) project. The IBHIS Request for Proposals (RFP) was re-released on November 18, 2009. Vendor responses to the RFP were received on February 22, 2010, and the first phase of evaluation of vendor responses is underway. Evaluation activities will be ongoing for most of this calendar year.</p> <p>The Contract Provider Technology Project (CPTP) is well into the implementation phase. The sample Technological Needs Funding Agreement (TNFA), which serves as the contractual mechanism for funding Contract Provider IT projects, was approved by the Board of Supervisors on March 2, 2010. Actions are underway to initiate TNFA(s) for 3 of 117 eligible Contract Providers that have completed the IT project review and approval process. DMH is anticipating a significant increase in Contract Provider project proposals now that the TNFA and Contract Provider funding allocations have been approved by the Board.</p> <p>A project manager has been assigned to the Consumer/Family Access to Computing Resources project. Project planning activities and evaluation of potential locations for deployment of computer resources for consumer/family use is underway.</p> <p>DMH, through the MHSa FY 2010-11 Annual Plan process, is proposing elimination of the Telepsychiatry Feasibility Study and Recommendations Project and replacement of that project with the Telepsychiatry Implementation Project. This proposal is subject to local stakeholder and California Department of Mental Health review and approval. DMH proposes cancellation of the approved feasibility study and advancing to implementation based upon its two successful two-year pilots of telepsychiatry (Antelope Valley and Catalina Island) resulting in significant cost reductions, and reports indicating considerable consumer and clinician satisfaction with services. Additionally, implementation of telepsychiatry is supported by community stakeholders, DMH management, and County CIO. If approved through the Annual Plan process, implementation activities for telepsychiatry can begin early in FY 2010-11.</p> <p>CIOB expects to initiate activities on the 2 remaining technology projects (Data Warehouse Redesign and Personal Health Record Awareness and Education) as personnel and other resources are available.</p>
Capital Facilities (CF) Plan	<p>The MHSa Capital Facilities Component Proposal is currently posted at the DMH MHSa web site (http://dmh.lacounty.info/mhsa/) for Public Review and comment until March 30, 2010. It was presented to the MHSa Stakeholder Delegates on February 26, 2010 and the Delegates voted to endorse the plan. The plan is scheduled to be presented for Public Hearing held by the Mental Health Commission (MHC) on April 8, 2010. It is anticipated that the MHC will unanimously approve the MHSa Capital Facilities Component Proposal.</p>
Incubation Academy	<p>During December 2009 the Incubation Academy completed the fourth quarter Advanced session. A total of 113 agencies attended the Incubation Academy since its inception in January of 2009. The second year of the Incubation Academy started with the Basic session in February with 25 individuals representing 19-20 agencies. The Advanced session took place March 15-17, 2010.</p>

MHSA Plan/Activity	Status/Accomplishments/Future Milestones
Regional Partnership	<p>Dr. Bruce Chorpita of UCLA has been selected to conduct research into the outcomes of the evidence based practices for children under the Katie A. Agreement.</p> <p>In April 2010, Los Angeles County will host meeting of Regional Partnerships project teams from Southern California counties.</p>
Workforce Education and Training (WET) Plan	<p>Request for Services (RFSs) for Recovery Oriented Supervision Training and the Licensure Preparation Training for Masters of Social Work (MSWs), Marriage & Family Therapists (MFTs), and Psychologists have been tentatively approved by County Counsel; approval is pending review of the evaluation tool. RFSs for Expanded Employment Opportunities for Parent Advocates/Parent Partners, Mental Health Career Advisors, and the Intensive Mental Health Recovery Specialist Training Program have been forwarded to our Contracts Development and Administration Division (CDAD) and Financial Services Bureau (FSB) for review. A Faith Based-Public Mental Health Community Partnership Proposal has been drafted for implementation during FY 2010-11. This pilot program supports a partnership coalescing faith based organizations and mental health staff to discuss pastoral and mental health concerns. Also, the Interpreter Training Program is scheduled for implementation during April and May 2010 in Service Areas 2, 3, 6, and 8. The Program trains individuals interpreting for mental health providers in our system as well as the providers utilizing the interpreters.</p> <p>Workforce Education and Training (WET) budget has been revised to expand allocations through FY 2016-17 (lifetime of WET). All services are funded through FY 2015-16 leaving FY 2016-17 available in the event unspent dollars accumulate from prior years. (NOTE: WET funds revert to the State July 2017, if unspent.) Lastly, funding for MSW and MFT (stipends for FY 2009-10 have been reduced by 50%, allocating 26 MSW and 36 MFT stipends). For FY 2010-11, stipends are further reduced by 70%: 14 MSWs, 20 MFTs and 2 Psychiatric Nurse Practitioners. Post Doc Fellowships were funded for Psychologists for FY 2009-10 thru FY 2010-11 and fund approximately 6 positions annually.</p>
Prevention and Early Intervention (PEI) Plan	<p>In December 2009 DMH conducted four "How to Become an MHSA PEI Contractor" training workshops, one in Long Beach, Carson, Alhambra, and Universal City. These four workshops were attended by 306 individuals, representing 249 agencies and organizations, the majority of whom did not have a contract with DMH. The emphasis was on providing information about the PEI services to be contracted out, the process to get on the MHSA Master Services Agreement list, the bidding process, subcontracting opportunities, and the Incubation Academy.</p> <p>During December 2009-February 2010, DMH developed several RFSs for the PEI Evidence-Based Programs (EBPs) to be bid out for the Early Start and PEI services. These included Improving Mood-Promoting Access to Collaborative Treatment (IMPACT) and Family Focused Strategies for Reducing Mental Health Stigma and Discrimination. In addition, EBP and promising practices programs eligible for DMH's transformation strategies for 132 contract agencies were identified. Information on eight key EBPs and promising practices, as well as other programs in the PEI Plan, were presented at provider meetings held in January 2010 and February 2010 and attended by nearly 500 individuals.</p>

Full Service Partnerships (FSP)

The following table outlines Third Quarter FSP enrollment information for each age group:

Program	February 2010	
	# Enrolled	% Enrolled vs. capacity
Child	1,591	92%
TAY	1,074	91%
Adult	3,680	91%
Older Adult	275	91%
Total	6,620	91%

Field Capable Clinical Services (FCCS)

The following grid outlines Third Quarter data for FCCS programs for each age group.

Program	January 2010*
	# Served
FCCS – Child	138
FCCS – TAY	167
FCCS – Adult	4,016
FCCS – Older Adult	1,472
Total	5,793

* January data used due to lag time of February data entry and claiming.

Wellness/Client Run Centers

Program	January 2010*
	# Served
Wellness/Client Run Centers	11,376

* January data used due to lag time of February data entry and claiming.

The next MHSA implementation status report will be submitted to your Board in June 2010 and will provide Fourth Quarter data and updates to include the months of March through May 2010.

Each Supervisor
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If you have any questions regarding this report, please contact me at (213) 738-4601, or your staff may contact Robin Kay, Ph.D., Chief Deputy Director, at (213) 738-4108.

MJS:RK:DM:dig

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Mental Health Commission